

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committ-  
ee (Insu**A.**

Full Name (Last, First, Middle Initial)

Charles Symington

Mailing Address 127 South Peyton Street

City

Alexandria

State

VA

Zip Code

22314-2879

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Independent Insurance Age-  
nts & Brokers

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	1	0

Transaction ID: 9038622

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Keith Schuler

Mailing Address 1357 E Lassen Ave

City

Chico

State

CA

Zip Code

95973-7824

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
InterWest Insurance Servi-  
ces, Inc. - C

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	5	/	2	0	1	0

Transaction ID: 9039199

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Richard Oulundsen

Mailing Address 33 Court St

City

New Britain

State

CT

Zip Code

06051-2211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jones, Raphael & Oulundse-  
n, Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	5	/	2	0	1	0

Transaction ID: 9039201

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1750.00

TOTAL This Period (last page this line number only) .....